



EmployeeUPDATE

Our Mission: To serve the people of North Carolina by enabling individuals, families and communities to be healthy and secure, and to achieve social and economic well-being.

A monthly publication for employees of the North Carolina Department of Health and Human Services

Lawrence named DMA director

Dr. William Lawrence Jr. has been named acting director of the Division of Medical Assistance, replacing Mark Benton.

Dr. Lawrence is the former senior deputy director of DMA. A board-certified pediatrician, Lawrence's professional experience is split between medical practice and health administration.

"I circuitously ended up doing this," he explained. As a practicing physician in Winston-Salem, where he graduated from Bowman-Gray School of Medicine, he found a majority of his patient population were Medicaid recipients. That figure reached greater than 85 percent when he moved to Washington, D.C., to join the clinical faculty at Children's National Medical Center. He later became medical director of the Children's Health Centers-SE.

"I began to understand the population Medicaid serves," he said.



Dr. William Lawrence Jr.

Returning to North Carolina in 2004, the UNC graduate became DMA medical director. "I was able to combine my clinical knowledge of the population and my administrative knowledge," he said.

He takes the director's position at a time of transition for DMA. Converting

to a new and more powerful management information system "creates a great opportunity for future growth and efficiency," he said, "but it significantly stifles what you can do here and now."

The same is true of mental health reform, which promises real benefits for patients and lower costs for taxpayers, "but there are still efficiencies that must be achieved, along with our partners in the reform effort," he said.

And uncertainty at the federal level with the State Children's Health Insurance Program (known as N.C. Health Choice here) and other regulatory matters will present "challenges for us in responding," Lawrence said.

But DMA is anxious to tackle the challenges thrown its way, he said. The Community Care networks, providing the administrative efficiencies and preventive health benefits of managed care to the state's Medicaid

Continued on page 2

INSIDE TOP FEATURES

Medicaid's Community Care recognized, Page 2

Streets recognized by SE4A, Page 3

Secretary Benton Kicks Off LeadershipDHHS III, Page 3

Awards presented by Division of Aging and Adult Services, Page 4

**Eat Smart,
Move More
in your
community**

Page 7



Lawrence named DMA Director cont. from page 1

recipients, are reaping incremental rewards in patient health even as it reaps national recognition. (See related story below)

“We want to keep all our important initiatives moving forward,” Dr. Lawrence said, “and at the same time, manage the constant influx of work.” ■

Medicaid’s Community Care recognized for innovation, influence

A joint Division of Medical Assistance and Office of Rural Health program has been named a governmental innovator by Harvard University.

Community Care of North Carolina was recognized for the benefits it provides to Medicaid children and families in North Carolina — and in states that have begun adopting North Carolina’s Community Care model.

The 2007 Annie E. Casey Innovations Award in Children and Family System Reform was presented in September by the Ash Institute for Democratic Governance and Innovation at Harvard’s Kennedy School of Government. The award includes a \$100,000 grant that Community Care of North Carolina will use for state and national promotion.

Community Care uses the principles of managed health care to provide higher-quality services to Medicaid patients and to save taxpayers money. At the heart of the program are 14 regional health networks that cover all North Carolina counties. More than 3,500 primary care physicians are network members. Almost half the state’s Medicaid population is enrolled in the program, and more than 70 percent of Medicaid children are enrolled.

Benefits to patients accrue from having a medical “home.” Navigation of the system is simplified, and access to services is heightened — including traditionally underaccessed health services such as dental and mental health care. Centralization also allows case management; regular reviews of charts and records help streamline care delivery. The results are efficiency and medical appropriateness.

A key benefit of Community Care has been improved treatment for chronic diseases and conditions — diabetes, hypertension, asthma, heart disease and depression, to name a few. With regular monitoring, patients can manage many of these conditions through medication and lifestyle changes. Studies have shown it works. For example, diabetic patients in Community Care have demonstrated a steady decrease in blood sugar levels and improved glycemic control.

Besides keeping patients healthier overall, the improved management prevents expensive emergency room visits or lengthy hospital stays. The combination of streamlined health care delivery and savings through avoidance benefited taxpayers by more than \$124 million last year, according to an actuarial study performed on behalf of Community Care. Stated another way, for every \$1 spent on the program, it saved \$2.

Word of Community Care’s successes has spread to other states. Ten have launched their own programs modeled on North Carolina’s, and another 20 have asked DHHS staff for details. ■

Streets recognized by Southeastern Association of Area Agencies on Aging

Dennis Streets, director of the Division of Aging and Adult Services (DAAS), received the Jane Kennedy Excellence in Aging Award at the Southeastern Association of Area Agencies on Aging (SE4A) Conference in Savannah, Ga., in September.

The award, one of the most prestigious presented by SE4A, recognizes outstanding contributions of individuals or organizations that promote the safety, welfare and well-being of older people in the Southeast region.

"I am honored and humbled to receive this award," said Streets. "This award

is a testament to the wonderful work the entire DAAS family is doing for the citizens of our state. I look forward to continuing that relationship for a long time to come."

Streets was nominated for the award by the N.C. Association of Area Agencies on Aging. In their nomination they noted qualities Streets exemplifies, including compassion, enthusiasm, passion and humility. They also made note of Streets' work as chief architect in planning for the future of aging in North Carolina. ■



Dennis Streets

Secretary Benton kicks off LeadershipDHHS III

The 2007-2008 *LeadershipDHHS* program got under way on Sept. 18. Congratulating the new participants on their selection for *Leadership-DHHS III*, Secretary Dempsey Benton stressed the importance of leadership development to building a strong organization for the future, as well as another benefit of the program—the opportunity to develop personal relationships and networks that will facilitate better understanding of all that we do as a department.

The secretary spoke of the importance of knowing our external environment and testing it to make sure we stay in tune with the people we serve. He reminded participants of the importance of small but meaningful

steps toward performance improvement because these are the footsteps of organizational progress, saying, "It takes lots of significant small steps, constantly being applied" to achieve excellence.

The remainder of the first session was devoted to a seminar on the different ways people have of communicating with one another. After good discussion, laughter and some role playing, participants were organized into teams that reflect a mixture of different communication styles. Over the next several months, these teams will work together on projects of their choice.

Future sessions will provide opportunities for participants to learn more about the department through discussions on programs (such as the status of mental health transformation, housing/homeless issues and challenges facing Medicaid) as well as operations (such as dealing with the media, customer service, and how to approach process improvements).

LeadershipDHHS is a program sponsored by the department's succession planning committee. It runs for six monthly sessions between fall and spring of each year. ■

Awards presented by Division of Aging and Adult Services

The DHHS Division of Aging and Adult Services presented its 2007 Aging Awards at the North Carolina Conference on Aging in Winston-Salem in September.

“Three different Division of Aging Awards are given to recognize excellence in addressing the needs of older adults in North Carolina,” said Dennis Streets, director of the DAAS. “Once again we are privileged to recognize the outstanding accomplishments of those serving our citizens with commitment, caring and concern.”

The *Ewald W. Busse Award* recognizes an individual or organization that has had a significant impact on enhancing the health status of older North Carolinians through efforts to direct health-related policies and/or to provide leadership in developing innovative solutions to health care problems. Dr. Busse was president emeritus of the N.C. Institute of Medicine and the founding director of the Duke University Center for the Study of Aging and Human Development.

The 2007 Busse award went to Dr. Eleanor (Ellie) McConnell. A nationally recognized gerontological nurse, scientist, educator and clinician, Dr. McConnell has dedicated more than 30 years to improving the care of older adults. She is currently in a joint clinical and academic appointment at the Duke University School of Medicine and Durham VA Medical Center. Her career has been characterized by consistent, outstanding contributions to nursing, and using a creative interdisciplinary approach to research, teaching and evidence-based practice to promote the quality of life of vulnerable older adults.

The *George L. Maddox Award* recognizes an individual or organization in the state that has excelled in creative programming for older adults. Dr. Maddox, for whom the award is named, is a noted gerontologist and director of Duke University’s Long-Term Care Resource Program.

The recipient of the 2007 Maddox Award is Alice Keane, who has worked for more than 30 years to improve the lives of older people. From the early 1980s until today, Keane has served as the Local Games Coordinator of the Greenville-Pitt County Senior Games. She has researched and implemented many programs that enhance the health status of people 55 and older, including athletic events for seniors, the Silver Arts and a statewide walking program. Keane served as the first chair of the N.C. Senior Games Board of Directors and again is serving as chair in 2007, further proof of her dedication to the concept of healthy aging.

The *Ernest B. Messer Award* recognizes a community (a defined geographic area) in the state that has excelled in addressing the needs of its older citizens. The award is named for the late North Carolina legislator and assistant secretary for Aging. The H.L. McCrorey Family YMCA in Charlotte is the 2007 recipient of this award.

Named after Dr. Henry Lawrence McCrorey, the YMCA is celebrating 70-plus years of providing services to the residents of the Northwest Corridor of Charlotte. The Northwest Corridor has several neighborhoods that have been identified as fragile, all within a five-mile radius of the YMCA. These neighborhoods face problems with transportation, housing, jobs and economic development. The YMCA understands these needs of the community and has demonstrated its commitment to programs that build strong kids, strong families and strong communities. In 2000, the YMCA began focusing on the needs of older adults, and now 17 percent of their 4,500 members are older adults. The Y offers classes in chair aerobics, ballroom dancing, water aerobics, a senior walking club, an African drum class, senior praise dance, senior choir, bingo, bowling and many other regular exercise programs. ■



Jalil Isa

iSalud y Saludos!

'Fiesta del Pueblo'

Latin music was filling the air, Hispanic food was filling hungry bellies, and Latinos and non-Latinos alike were learning a thing or two about health, safety, and a multitude of other resources found in the Triangle during the recent 'Fiesta del Pueblo' in Raleigh.

Now in its 14th year, the event was founded by the non-profit Latino advocacy group El Pueblo.

Those attending, and paying the \$5 fee to get in (an increase of several dollars from previous years), still found an abundance of entertainment and educational materials. Among them were folks from DHHS. The Division of Social Services was one of the divisions handing out Spanish-language materials to educate the public about the many services available through local DSSs. Our partner *Healthy Start* also had a booth with instructors on-hand to teach new mothers and mothers-to-be about ways to continue decreasing the infant mortality rate while increasing the overall general health of moms and newborns.

The *Healthy Start* organization has been hard at work putting together a just-released magazine-style publi-

cation containing a wealth of information about women's and children's health. The publication is chock-full of useful information in Spanish for the state's hundreds of thousands of Latinas.

All these events are coinciding at a well-known time of the year for most Hispanics. As Hispanic Heritage Month got under way in mid-September, several events were scheduled to commemorate the occasion. But this year, the period running from Sept. 15 to Oct. 15 has taken on even more significance in North Carolina thanks to a proclamation from Gov. Mike Easley declaring the monthlong observation in North Carolina. The proclamation highlights some of the accomplishments and impact this population has had in our state, including the positive economic impact of this growing segment of our residents. You can read the whole text of the proclamation on the governor's Web site (www.governor.state.nc.us/News/Proclamations).

In the meantime, some of us will take this and other opportunities afforded to us during this month to learn more about this culture. Others will not need a special month and will

seek to learn more about those around them at all times of the year! ■

Champs!

The DHHS softball team won the 2007 N.C. State Government Softball League tournament in late August by defeating the Department of Environment and Natural Resources team with a score of 14 to 12.

The league, which has been in existence for more than 25 years, is made up of employee and spouses from nine or ten departments in North Carolina state government. The regular softball season runs from late April to end of August, followed by a single-elimination end-of-year tournament. The teams are co-ed and open to all state employees, retirees and their immediate family members. DHHS games are played on the Dix campus softball field in Raleigh and usually run from about 5:45 p.m. to 7:45 p.m.

“During the regular season, we play two five-inning games against each team, so it usually works out to two



The championship DHHS team included (front row, left to right): David Spruill (DIRM), Ryan Watts (Governor Morehead School), Kent Walton (DIRM), Leo Miller (spouse of Kim Miller, DIRM), Carolyn Spruill (GMS) and Mark Prakke (DIRM). Also (back row, left to right): Jason Taylor (DIRM), Pam Snyder (GMS), Douglas Howard (DIRM), Ron Higginbotham (Division of Public Health), Jess Stokes and Mike Kearney (DIRM), David Stowe (DIRM retiree), Angela Taylor (DIRM), and Tiana Spruill (daughter of David and Carolyn Spruill), as well as John McLamb (DPH) (not pictured).

or three nights per month that we play,” said DHHS team member Mark Prakke of the Division of Information Resource Management (DIRM).

Spring training will start next April, so contact Prakke at Mark.Prakke@ncmail.net if you are interested in participating. ■

Eat Smart, Move More Health Tip



Re-Think Your Drink

We all love a refreshing drink with a meal, as a snack, or after physical activity. Sodas, sweet tea and other sugary drinks taste great, but have a lot of calories and no nutrients. Next time you're thirsty, re-think your drink. Try water with lemon or other flavored, unsweetened drinks instead.

For more tips on how to re-think your drink where you live, learn, earn, play and pray, visit

www.EatSmartMoveMoreNC.com



Eat Smart, Move More in your community

The *Eat Smart, Move More...NC* movement aims to increase opportunities for North Carolinians to eat healthy and be physically active where they live, learn, earn, play and pray. Since January 2000, *Eat Smart, Move More...NC* and the N.C. Division of Public Health have given more than \$1 million to county health departments across the state to help their residents achieve healthier lifestyles.

This year, 21 county health departments, out of 38 applicants, are receiving a share of the \$321,000 award to support *Eat Smart, Move More: North Carolina's Plan to Prevent Overweight, Obesity and Related Chronic Diseases*.

"North Carolina ranks 17th in the nation in adult obesity and fifth in the nation in overweight adolescents," said State Health Director Leah Devlin. "*Eat Smart, Move More...NC* is combating this every day by helping North Carolinians achieve a lighter, healthier lifestyle."

Each of the 21 counties will use their award to motivate change in residents' daily routines by building communities that foster healthy choices:

- Durham County will expand the church-based PEACE Project, which offers social supports to encourage healthy food choices



at church meetings as well as participation in exercise opportunities. Fitness equipment and nutrition information will be available for members of the churches.

- Pitt County Health Department plans to increase the number of physical activity facilities in Pitt County by adding to the walking trail at the County's first district park. The current trail will be lengthened to 1/2 mile.
- Buncombe County will launch Downtown on the Move to promote physical activity and healthy eating as the norm. This plan will encourage healthy worksite policies and urge employees to walk, bike, or run during their work commutes and while doing errands.

Other counties are building walking trails and parks, installing new playground equipment, and providing worksite wellness programs to county employees.

In addition to the projects funded by the community grants, counties around the state offer classes

and programs for their residents. Families Eating Smart and Moving More teaches families how to fit healthy eating and physical activity into their busy lives. Eat Smart, Move More, Weigh Less is a weight management program based on mindfulness. These are available through local health departments and cooperative extensions.

All DHHS employees can be active participants in *Eat Smart, Move More...NC*. There are seven messages for everyone: prepare more meals at home, spend less time in front of the TV and computer, be physically active every day, down-size your portions, drink less soda and sugar-sweetened drinks and more water, enjoy more fruits and veggies, and breastfeed your baby. It's time for all of us to eat smarter and move more!

For more information, visit the Eat Smart, Move More Web site at www.myeatsmartmovemore.com or www.eatsmartmovemorenc.com. ■

Allison Slight,
DHHS Public Affairs Office intern

DHHS WELLNESS INITIATIVE

Suzanna Young,
DHHS Wellness Initiative Director

Did you buy a soft drink from the vending machine at work today? If so, you are not alone. Americans spend over fifty billion dollars on soft drinks each year. Carbonated soft drinks are now the single greatest source of calories in this country, providing about seven percent of all calories consumed.

Most of us are aware that sweetened soft drinks are high in calories, but how high they are in comparison to other foods? A 12-ounce soft drink has about 150 calories—that's equivalent to adding nine teaspoons of sugar to a glass of iced tea! Large soft drinks purchased at fast food outlets can have twice that many calories. Compare 24 ounces of soda to the frozen meal I brought for lunch today: a total of 280 calories, it includes glazed chicken breast, roasted potatoes, green beans with carrots, and even a cherry crisp dessert. This is a satisfying meal providing a variety of important nutrients, while the soft drinks offer nothing more than empty calories.



Drinking two 12-oz. sweet soft drinks a day adds 109,500 calories in one year. This is equal to:

- ❖ Consuming 62 pounds of sugar annually – that's over 12 five-pound bags of sugar.
- ❖ 31 pounds of stored fat.

When soft drinks become a regular part of our daily diet, a number of serious health effects can result. Sugar in liquid form is absorbed quickly by the body. The amount of sugar in a soft drink causes a rapid increase in blood sugar, stimulating the release of large amounts of insulin. These fluctuations in a person's blood sugar levels cause changes in energy and mood levels and may contribute to a number of other health problems. Substituting diet drinks addresses some, but not all, of the health issues associated with soft drinks.

- ❖ **Weight Gain** | The high caloric content of soft drinks contributes to weight gain. Studies suggest that the high-fructose corn syrup in soft drinks also decreases the body's level of an important appetite-regulating hormone called leptin.
- ❖ **Increased Risk of Diabetes** | Weight gain greatly increases the risk of developing type 2 diabetes, but soft drinks may by themselves be a significant cause of diabetes, due to the large amount of rapidly absorbable sugar (think liquid candy) and the stress this causes to the body's insulin-producing cells.
- ❖ **Tooth Decay** | The sugar and acid combination found in soft drinks is a major cause of tooth decay. If you think you are avoiding this problem by drinking diet drinks, be aware that diet drinks also contain acid and if consumed with carbohydrates, can still cause tooth decay.

cont. on page 9

DHHS Wellness Initiative cont. from page 8

- ❖ **Digestive Problems** | Carbonated drinks can cause gas and stomach irritation for some people.
- ❖ **Replaced Nutrients** | Soft drinks, which have no nutritive values, often substitute for healthier foods and beverages that provide essential nutrients like calcium and vitamin C.

Instead of soft drinks, consider drinking water, unsweetened iced tea, low-fat or skim milk, or vegetable juice. Fruit juices may be somewhat lower in calories than soft drinks and contain some vitamin C, but juices are still a concentrated sweet with little nutrient value and can have some of the same health effects of drinking sweetened soft drinks. If you do choose juice, avoid juice beverages that contain high-fructose corn syrup. Look for 100 percent juice products and limit serving size to half a cup. ■

Flu Shot Update

Flu season is almost here. Your best protection is to get a flu shot every year. DHHS is sponsoring flu shots for Raleigh area employees and dependents on

**Monday, Oct. 15 &
Wednesday, Oct. 17
9 A.M. to 4 P.M.**

Haywood Gym on Dix Campus.

- DHHS employees outside Raleigh should contact their human resources office about scheduled clinics or go to findaflushot.com for flu clinics in their area.
- State Health Plan members, including retirees, dependents and spouses, will be eligible to receive a flu shot. No sign-up is needed at the Raleigh event. All State Health Plan and/or BCBSNC Members must present a valid State Health Plan and/or BCBSNC ID Card and photo ID.
- Maxim Healthcare will charge family members and employees not covered by the State Health Plan and/or BCBSNC \$30 for a flu shot. Maxim can accept cash, checks and Medicare Part B. Medicare Part B participants will not be required to pay a co-pay.

Health fair planned at the Mexican Consulate in Raleigh

North Carolina will be one of nearly three dozen states participating in a special Spanish-population health campaign Oct. 13-21. Binational Health Week (BHW) is an annual weeklong series of health-promotion

and health-education activities benefiting all underserved Latinos, regardless of their national origin.

In North Carolina, the event is being coordinated by the Mexican Consulate's *Secretaria de Relaciones Exteriores* (Exterior Relations Secretary). On Saturday, Oct. 20, from 9 a.m. to 2 p.m., members of the

cont. on page 10

Adoption Profile

Introducing Tevin...

Tevin is an independent child who prefers being by himself. His favorite activity is playing basketball, as long as he can get the ball. Tevin also likes to draw, read and write, and often spends hours doing so. Tevin likes visiting the barber a couple of times a month to keep his hair neatly trimmed. He enjoys church, but is not too crazy about singing in the choir.

Tevin says that sometimes he likes school. However, it can be a challenge for him to always maintain appropriate conduct during the long day of classes. Tevin's alternative school provides an individual learning plan. With this in place, he can work at a more successful pace and better stay on task with his schoolwork. Tevin's small steps at social success are due to his foster parents thoroughly preparing him for



Tevin, b. May 26, 1994

every activity or outing so he is not surprised and he understands what is expected and what he can do.

A Family for Tevin...

Through the techniques used by his foster parents, Tevin has learned what actions and conduct are acceptable. He has made progress in accepting consequences and new types of discipline, such as time out or going to bed early. He is able to sit and discuss his feelings or frustrations with his foster parents. Parenting Tevin will require unconditional commitment, a strong support network, consistent routine, safe discipline, and above all, a great deal of nurturing. Tevin is very clear on his own personal boundaries, and they must be respected and acknowledged.

For more information on this child, or adoption and foster care in general, call N.C. Kids Adoption and Foster Care Network toll-free at 1-877-NCKIDS-1 (1-877-625-4371). ■

Health fair cont. from page 9

Spanish-speaking community are encouraged to come to the Mexican Consulate in Raleigh, 336 E. Six Forks Rd., to learn more about staying healthy. Several organizations, including DHHS, will be on hand to help provide important information.

Since its inception in seven Mexican states and seven California counties in 2001, Binational Health Week has steadily expanded. In 2006, an estimated 300,000 people partici-

pated in 1,014 activities and received 49,349 health screenings throughout the United States and Canada. An additional 386,000 people were reached and 235,000 health screenings provided through activities carried out in 23 federal entities and 294 municipalities in Mexico.

This year, with the participation of 46 Mexican consulates, 11 Guatemalan consulates, 12 Salvadorian consulates and nine Colombian consulates,

Binational Health Week will take place in 31 states in the U.S. and three Canadian provinces, as well as in Mexican states with high rates of migration. ■